

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

Serial No.
10/553,009
Applicant(s)

Filing Date

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT			AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/						51						
2	/						52						
3							53						
4	2/						54						
5							55						
6	1/						56						
7	1/						57						
8	0/						58						
9	1/						59						
10	0/						60						
11	0/						61						
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14	0/						64						
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46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.	/												
TOTAL DEP.	15	↓											
TOTAL CLASPS	16	←											